Social Security Number	3. Initial Employme			pe of Er	nploymer		) ir Gov'i. Em	uptoy <b>ee</b>		ther				
000-01-0036 Transferred From	5. Heed Al	wed Al 7. Employe			He Has (X one) 8. Entitled To Re			To Retur						
Roswell, NM				Been Discharged Out			IN CASE OF ACC			No Yes			No	
	IST BE ENTERED	BELOW		15. Na	me		IN CAS	E OF AL	CIDEN	NOTIF				
Name (First, Middle, Last) Arthur	Cash				***			- 11					_	
Street Address		21 (1)		16. Str	et Addr	955								
TEST: STNM0036 (A)					17. City . 18. State 19. Te						elephone No. (Include Area Code)			
Rosewell	NA			1.										
		20. FIF	RE LOCATION	N IDEN	ITIFICA	Colum	n C	-		-	nmuko	D		
Column A Column B					1. Fire Name					1. Fee Name				
See No. 3. Ung Cp	de 2. Fire No				2. Fire No. 3. Unit Code				2. Fee No. 3.			3, Unit	Code	
Z-NAO-326 H	8 AZ-NAO - 326		FAZ	4 Fire Location			5. State		4. Fire Location			5.	State	
Firefighter Classification 7, Ret		2 6. Fireaghter Classification 7. Rate			ghter Class	ufication	ication 7. Rate			6. Firefighter Classification			Rate	
AD-3 Ia	32	a AD-3 /2.32			6. Oate and Time				8. Date and Time					
s. Year			Hours	a. Yeer			Start Stop Hours		A Year			Stop Hour		
B C 6.	Hours Mo. Der	4 •		<u>b.</u>	c c	d.	•	-	0.	C	•	-	_	
212070019001	2.002 1	9 0700 173	2010.5	-					+-					
0213 4 4	<b>1</b> 02 2	0					_		+		-			
14 0700 1800 1	1.0 022	.1							-					
2 15 1 1	1 02 2	2							-	-			_	
0216 + +	V 022	3							-		-			
02 17 0700 1730 1	0.5 02 2	41 1	V						_				-	
12 18 4 4	¥													
Total Hours	9. Total Ho	urs —	+ 63.0	9. Tota	Hours -		$\rightarrow$		9 Tota	il Hours —		>		
Cores Amount 10. Gross Amount				10. Gross Amount (item 7 x item 9)					10. Gross Amount (item 7 x item 9)					
. Inclusive	(item 7 x item 9)			11. Inclusive					11. Inclusive Dates					
Dates  Z. Time Officer's Signature		ficer's Signature		1000	o Officer's	Signature		To 12 To	12. Tim	ne Officer's S	ignature			
Date Signed  13. Date Signed  21. SHOW "H" FOR HAZARD PAY AND "E" PLUS % FOR ENVIRONMENTA				13. Date Signed					13. Date Signed					
									22. Commissary Record					
21. SHOW "H" FOR HAZARD IN THE "HOURS" COLUM	PAY AND "E" PLU N FOR REGULAR E	S % FOR ENVIRO MPLOYEES.	NMENTAL DIF	FEAEN	TIAL	A De	-		b, Item		1	c. Ar	-	
A. 8 C. D. Accounting Classification E. Obect Class    General   Rate   Addres   (a) (b) (c) (a) (b) (c)				F. Amount (				COMM				43	5.90	
Gross Earn		COMM	Deduct.	4	5.90	)					+			
Federal W/		. <i>6</i> / Meals			<u> </u>	-	-				+			
State 1 W/H		K Lodging	g	_ ~	9	-	-			-	+			
State 2 W/H Garnish/Levy				_ <			Total -							
Disposable COMM Refund					<del>}</del> _	24. ADO Chack Number and Stamp								
Earnings /3/7.03 FED EIC					0	FED W/H: NOE								
440-92310.	45898	Net Ea	rnings	12'	71.13	1		ATE 1			V/H:	<u>нн</u>	_	
payment from available appr 25. Employee (Signature)		5. Time Officer (Signer	aure)	-		4	EIC		<i>-</i>			No	E	